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DIRECTOR'S MESSAGE

The Washington State Department of Veterans Affairs (WDVA) serves a truly unique population - men and women who swore to protect and defend the greater interests of our nation. Each of them is owed a debt of gratitude and a commitment of service from our nation and our state.

The WDVA Vision, Mission, and Goals have been developed through collaboration with the very population we are charged to serve.

With an increasing veteran population, WDVA has worked to ensure the future direction of the Agency is supported by, and will benefit those veterans who call Washington State home.

In 1997, we embarked on a journey to *Change the Face of WDVA* - and change we did. Guided by a Feasibility Study and a Master Plan, WDVA has gone from an Agency focused on intervention - to an Agency driven by **prevention**. We have reduced the number of domiciliary care beds catering to the higher functioning veterans, and put them to use for those who are the most vulnerable. At the same time, we have increased the number of federal dollars received and reduced the amount of state revenue spent on those services, freeing up state funds for other government priorities.

In the face of challenging economic times, we have bolstered efforts and significantly increased our contracted services to connect veterans to their federal benefits. Our statewide Field Service Network is drawing national attention as a model for the future. These efforts have produced outcomes, increasing personal income for veterans and adding revenue to stimulate the vitality of local economies.

With thousands of military personnel deployed in Iraq, Afghanistan, and other areas of the world, we are preparing for a new era of veterans - an era with physical and mental trauma unlike that of previous wars. Work being done today will lay the groundwork for services and partnerships that will ensure Washington veterans are served well. We have a significant leadership role to coordinate and influence all levels of government and service organizations to effectively "*Serve Those Who Served.*"

Our commitment to serve veterans relies on our ability to recognize and respond to the changing needs of today's veteran population. Through continued collaborative strategic and master planning, WDVA will have the agility to modify its delivery of services and respond to those needs. WDVA's strategy will focus on non-traditional and federal funding to meet these requirements.

Our journey has just begun. There is more work to be done and we will continue our mission of *Serving Those Who Served.*

AGENCY OVERVIEW

In relation to the Priorities of Government (POG), WDVA directly impacts four of the eleven priorities by improving:

- the condition of Washington's vulnerable adults,
- the health of Washington's citizens,
- the economic vitality of businesses and individuals, and
- the ability of state government to achieve its results

The Agency is divided into three divisions: 1) institutional services, 2) veterans services and 3) administrative services.

1. Institutional Services

Three state veteran homes provide long-term health care for honorably discharged veterans, to include, in some instances, their spouses or widows. Veterans Home residents are typically disabled, indigent or imminently indigent due to the high cost of long-term care.



The Washington Veterans Home at Retsil, near Port Orchard, is the largest of the state's Veterans Homes.
Established in 1910.
Total Beds: 262



The Washington Soldiers Home and Colony at Orting is located in the Puyallup Valley.
Established in 1891.
Total Beds: 183



The Spokane Veterans Home, located near medical services in Spokane.
Established in 2001.
Total Beds: 100

The Veterans Homes provide health and psychosocial services using an interdisciplinary team approach. The interdisciplinary team, composed of nursing, rehabilitative therapies, therapeutic activities, social services, medical and administrative staff, work together to provide an environment that encourages residents to function at their highest level of self-reliance and independence. Because the State Veterans Homes must meet stringent federal VA criteria, the range of services and quality of care provided in State Veterans Homes significantly exceed Medicare/Medicaid requirements.

2. Veterans Services – Statewide Field Services Network

Veterans Disability Service and Support

The veterans disability and claims support program delivers critical services to the state's eligible and often vulnerable veteran population living in both urban and rural areas. This network provides crucial advocacy services and representation to ensure veterans and their family members are able to understand and navigate a complicated federal system. *It is important to note that the role of the federal Veterans' Administration (VA) is to adjudicate; it does not provide community claims support.* Over 125 contracted service officers throughout the state provide disability claims services and act as legal representatives in the complicated claims process.

In federal fiscal year 03, the network brought \$849,565,000 into the state economy, up from \$768,392,000 in federal fiscal year 02, representing a 16% increase in one year.

In addition, WDVA operates a statewide Post Traumatic Stress Disorder (PTSD) network that includes 28 contracted licensed war trauma counselors.

Veterans Community-Based Services

WDVA's veterans community-based services incorporate a statewide network that includes re-integration services for homeless and incarcerated veterans, outreach to minority and women veterans, Post Traumatic Stress Disorder treatment and readjustment for King County veterans, centralized admissions processing for the Veterans Homes, Veterans Estate Management for incompetent veterans and serves the Department of Social and Health Services through an intergovernmental agreement to provide outreach to veterans in nursing homes and those who are housebound.

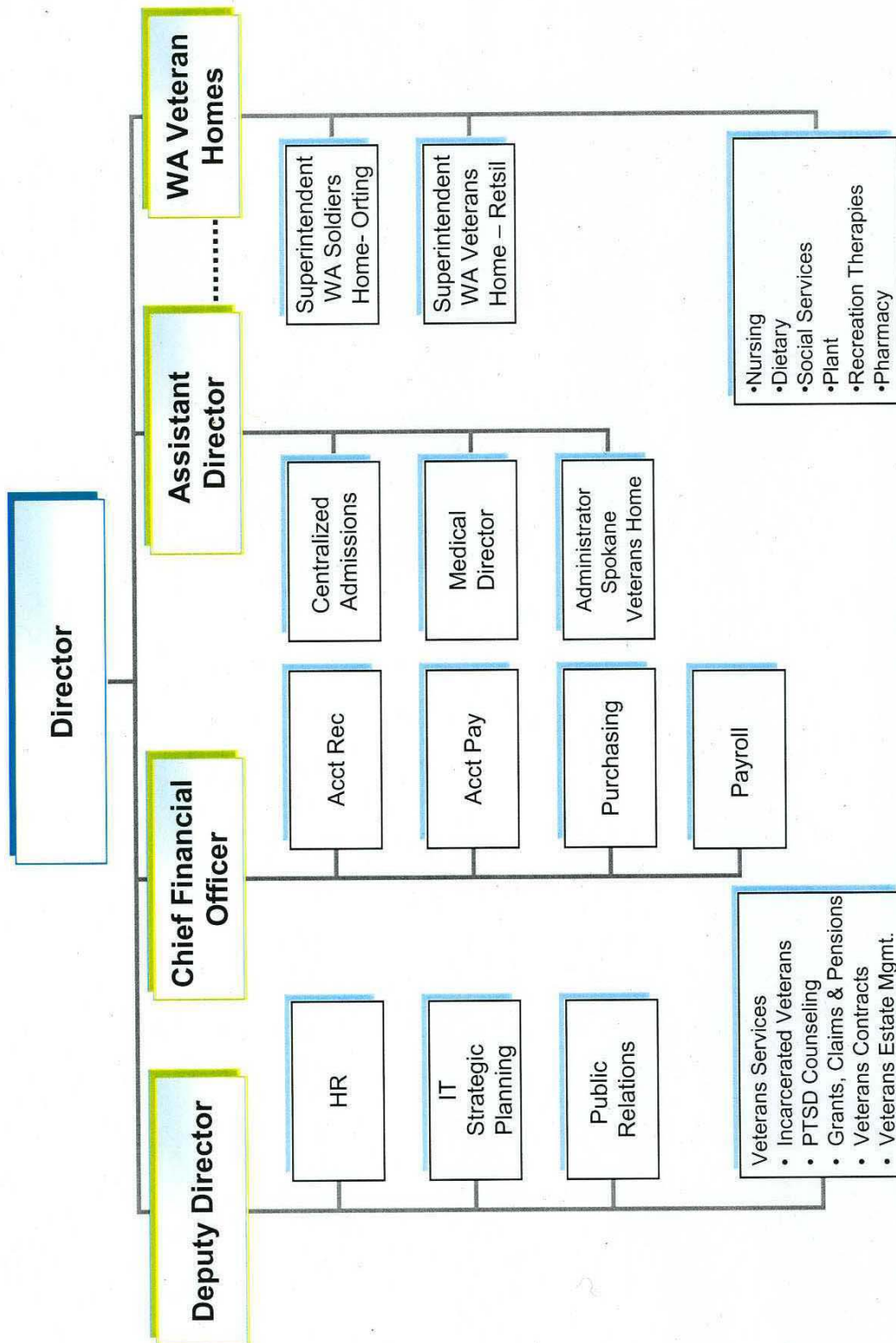
3. Administrative Services

The Administrative Services division supports the Veterans Services Program, the Washington Veterans Home at Retsil, the Washington Soldiers Home at Orting, and the Spokane Veterans Home. Services provided are information technology, emergency preparedness, budget and accounting, capital programs, quality assurance, training, legislative liaison, public affairs, quality and strategic planning, and human resources.

The Director's Office and headquarters provide leadership, policy direction, and oversee administrative support for the delivery of statewide veterans programs. The office also provides a communication link with the federal and state legislature, state agencies, veterans community and the general public.

The Governor appoints the director, who serves as a national executive officer for the National Association of State Directors of Veterans Affairs and works directly with Congress. The director is assisted by a deputy director who leads Veterans Services and many administrative support services and an assistant director who oversees the State Veterans Homes. The director, deputy director and assistant director work directly with the federal Department of Veterans Affairs, both in Washington State and Washington D.C.

ORGANIZATIONAL CHART



STATUTORY AUTHORITY REFERENCES

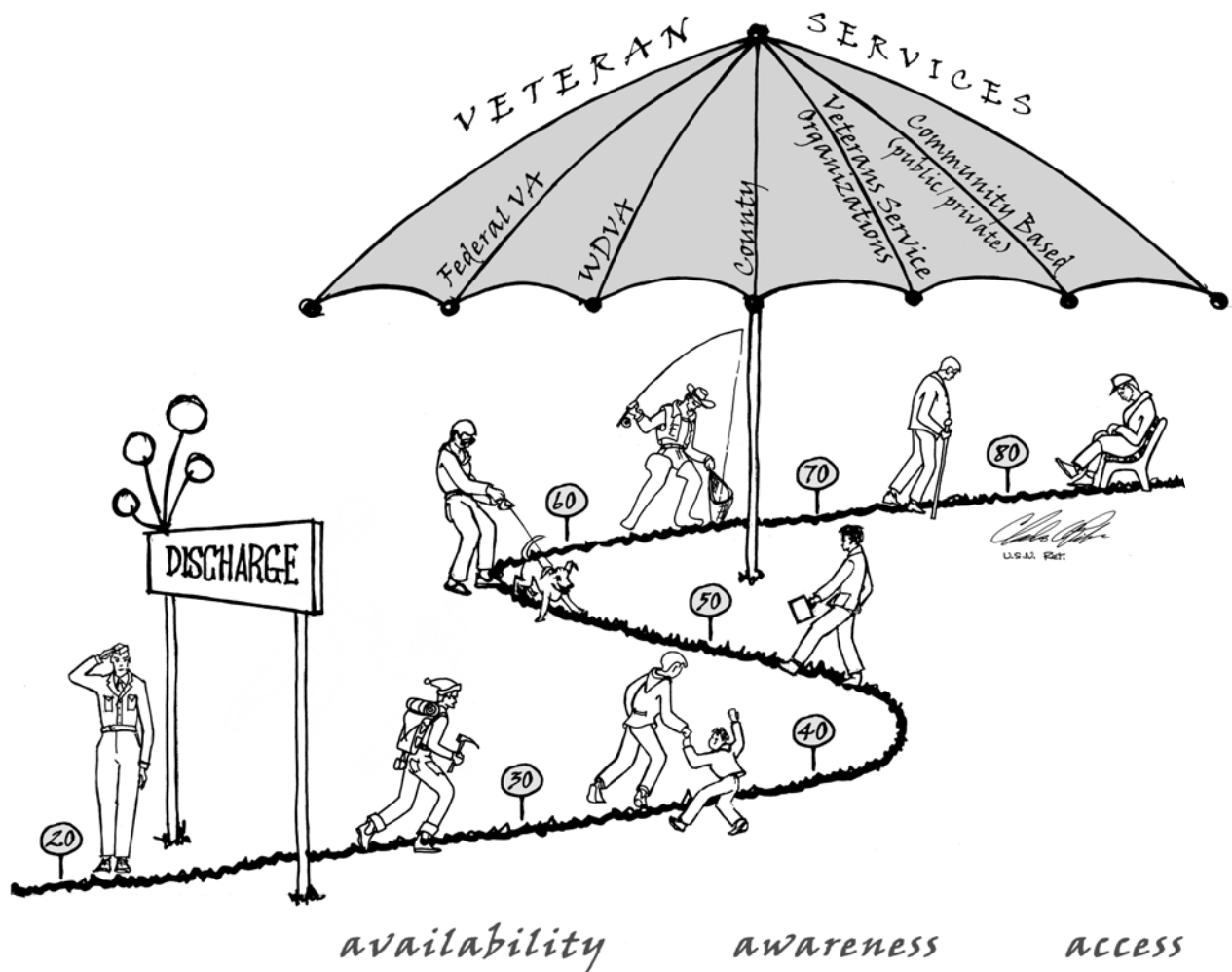
The statutory authority and responsibilities of the Department of Veterans Affairs are primarily defined by RCWs 43.60A; 43.61; 72.36 and 73.04. The Governor-appointed 17 member Veterans Affairs Advisory Committee's statutory authority is primarily defined by RCW 43.60A.080. In compliance with these statutes, the Director of the Department of Veterans Affairs is authorized and/or directed to:

- Effectively direct the functions of the Department to ensure compliance with existing federal and state laws pertaining to veterans of the state of Washington (RCWs 43.60A.020; 040; 070; 090).
- Act in advisory and cooperative capacity regarding all public resources available to veterans under the direction of local, state and federal government agencies (RCWs 43.60A.070; 904).
- Extend to any veteran and to the family members of such veterans such assistance he/she shall determine to be reasonably required (RCWs 40.60A.070; 43.61.030; 43.61.040).
- Act as executor under the last will or as administrator of the estate of any deceased veteran, or as the guardian or federal fiduciary of the estate of any qualified veteran, or of any bonafide resident of the state of Washington who is entitled to and is receiving funds from the US Department of Veterans Affairs (Federal VA), the payment of which is dependent upon the appointment of a guardian or fiduciary (RCWs 43.60A.070; 73.04.130).
- Provide and manage domiciliary and nursing care for eligible veterans and their eligible family members at the Washington Veterans Home, the Washington Soldiers Home & Colony and the Spokane Veterans Home. To provide for the maintenance of the Washington Veterans Home, the Washington Soldiers Home & Colony and the Spokane Veterans Home. Maintenance shall include provision of member's room and board, medical and dental care, physical and occupational therapy and recreational activities (RCWs 43.60A.075;050;055; & Washington State Constitution Article X, Paragraph 3).
- Provide for expenditure of state funds for programs and services in the field of veterans claims assistance performed by congressionally chartered and/or nationally recognized veterans organizations in the state of Washington on an equitable reimbursement basis (RCW 43.61.070).
- Provide counseling and outpatient treatment for war affected veterans and family members through a network of contract professional Post Traumatic Stress Disorder (PTSD) counselors/psychologists. Provide direct service, as well as consultation and education to community mental health providers. Service traditionally under served veterans to include: rural, racial minorities, and female veterans. Ensure quality services and coordinate treatment with federal VA Medical Centers, Veterans Centers, the Veterans Affairs Regional Office, and other funding entities in order to maximize treatment resources (RCW 43.60A.100; 110; 120; and 130).
- Provide advocacy, information, advice and assistance to veterans and their families and coordinate all programs and services in the field of veterans' claims service education, health, vocational guidance and placement, and services not provided by other agencies of the state or federal government (RCW 43.61.040).

VISION

Washington State will be a national leader in providing cost effective, innovative services for veterans and their families in our Homes and communities.

As illustrated in the graphic below, a key part of this vision is the development of an integrated and coordinated network of federal, state, local and private sector organizations that together provide needed services over the entire continuum of care during a Washington State veteran's lifetime. The effectiveness of providing this continuum of care is predicated upon three key factors: ensuring the **availability** of services; enhancing the veteran's **awareness** of services that are available; and providing the veteran with quick and easy **access** to the services.



VALUES

- **SERVICE:** We strive to exceed the expectations of our customers.
- **COMMITMENT:** We provide services with professionalism, compassion, dignity and respect.
- **INTEGRITY:** We strive to be the example.
- **COMMUNICATION:** We share information openly, directly and honestly.
- **INNOVATION:** We encourage and reward data-driven risk-taking and "out-of-the box" thinking.
- **DIVERSITY:** We value and utilize our differences and the richness they bring.
- **TEAMWORK:** We uphold common values and work toward shared goals.
- **RESPECT:** We treat others in a way that preserves their dignity and self-respect.
- **FLEXIBILITY:** We adapt to and embrace new and changing environment.

MISSION

Serving Those Who Served

We are committed to serving veterans by:

- Advocating the preservation and enhancement of their rights and entitlements.
- Creating an environment that respects individual dignity and worth.
- Providing assistance in achieving a quality life.

GOALS

1. Improve the quality of care and services for veterans and their families.
2. Maximize resources to honor the nation's debt to veterans.
3. Review core processes to anticipate and influence future needs.
4. Become an employer of choice, by recruiting, training, and retaining the best talent, resulting in delivery of high quality services.

TRENDS IN CUSTOMER CHARACTERISTICS

WDVA's Niche

WDVA provides services to a unique segment of the veteran population, with the ultimate goal of improving their quality of life. For example, the population accessing services through a State Veterans Home represents only a fraction of the entire veteran population; however, these are the most vulnerable and at-risk veterans in our state.

A look at resident characteristics in a State Veterans Home reveals that these are not typical nursing home residents:

- 90% are male;
- Many have histories of primary or secondary psychiatric diagnosis due to war trauma;
- Many have a history of substance abuse;
- Many are chronically homeless;
- Many have attempted to adjust to community facilities; and
- 95% are “medically indigent”, forcing them into community nursing homes or homelessness.

When veterans are cared for in a State Veterans Home, they are eligible for federal VA funding. This funding pays about two-thirds the cost of care, making WDVA the most appropriate care-provider. (The same funding would not be available to veterans residing in community nursing homes.)

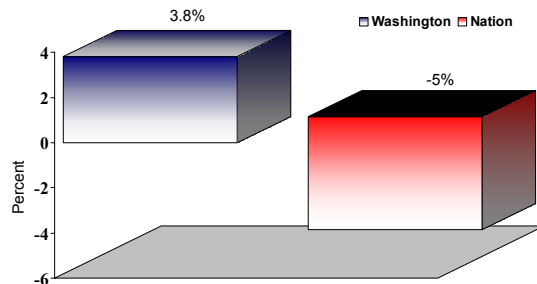
Veteran Demographics



One in Nine WA Residents is a Veteran

Washington State is home to over 670,000 veterans. One state resident, out of every nine, is a veteran.

Despite a perception that the veteran population is decreasing, the number of veterans living in Washington State actually increased by almost 4% over the last decade. Nationally, the veteran population decreased by 5% between 1990 and 2000. In addition to its growth, our veteran population is rapidly aging.



Trends in Washington's Veteran Population

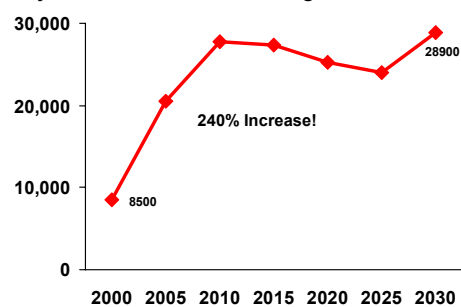
Four major trends in Washington's veteran population will affect Agency services and service delivery methods over the next six years.

1. An extraordinary increase in the veteran population age 85 and older.

According to federal VA projections, the number of veterans age 85 and over will increase by 140% between 2000 and 2005, and an additional 35% between 2005 and 2010. By 2010, veterans in this cohort will comprise almost one-quarter of the total Washington State population 85 and over, up from 10% in 2000.

This significant growth in the very elderly reflects the aging of World War II and Korean War veterans.

Projected Number of Veterans Aged 85 & Over in WA State



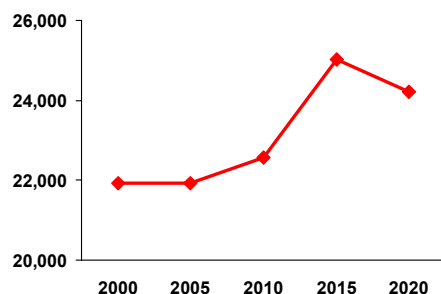
Its effects are evident in the fill levels of Washington's Veterans Homes. The two western Washington homes have experienced bed-fill levels between 96% and 100% for the last 5 years – see page 27.

In the future, there will also be an associated increase in special needs services, such as hospice care and care for Alzheimer's and related dementias. Using data from a recently completed federal VA study on prevalence rates for Alzheimer's, it is estimated that approximately 16,000 Washington veterans aged 65 and over will be diagnosed with the disorder by 2010, representing an increase of almost 100%. Increased demands are also likely for short-term rehabilitative care and geropsychiatric services.

While there will always be a need for 24 / 7 care within the vulnerable veteran population, not all veterans will require care in a Veterans Home facility. This demand for services represents an opportunity for the Agency to capture federal resources and broaden its role in providing alternative long-term care services, such as adult day care and respite care, allowing elderly veterans to remain in their homes longer or transition to the least restrictive community settings.

2. A continued increase in the number of aging veterans considered medically indigent.

WA State Medically Indigent Veteran Population Age 65 and Over

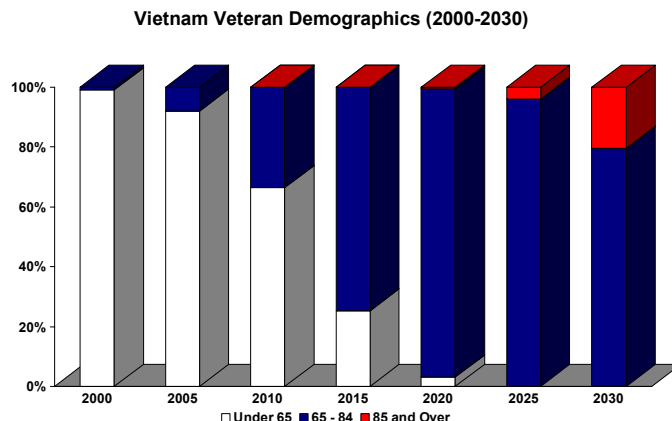


A growing number of aging veterans also leads to an increase in the number of medically indigent veterans – the very veterans who will require care in a State Veterans Home.

The Washington Veterans Homes primarily serve veterans whose cost of care would likely force them into community nursing homes or to become homeless. For this population, in-home care or other community based services are not options. Many of these veterans simply have no family structure or have separated themselves from remaining family members. Because of the unique characteristics of the veteran population, and because about two thirds of their cost of care is funded through federal and local revenues, 24 / 7 care in a Veterans Home is the most appropriate care setting.

3. The aging of Vietnam era veterans.

According to federal VA projections, Vietnam Veterans will continue to represent the largest proportion of total veterans – between 31% and 34% in Washington State through 2015. The aging of the Vietnam veteran population will occur as depicted in this chart:



Vietnam veterans represent the largest segment of Washington's veteran population, totaling 225,000. This provides a unique opportunity to employ intervention strategies with a goal of reducing future reliance on institutional care. While the majority of Vietnam era veterans are living healthy and productive lives, a small percentage are engaged in an ongoing life struggle to overcome psychological trauma, drug and alcohol dependency and other service connected medical maladies. These veterans fall into a cycle of addiction, family disintegration, joblessness, homelessness, and/or crime that is a severe burden to themselves, family members and friends, and community as a whole.

Approximately 31% of male Vietnam-era combat veterans suffer from Post Traumatic Stress Disorder sometime during their lives¹ and about one-quarter are afflicted by war-related disability.² It is also estimated that on any given day there are up to 5,000 **homeless** veterans in Washington State, of which roughly half are Vietnam veterans. Most of these homeless veterans suffer from chronic medical and psychological problems, substance abuse, and frequent job turnover.

One of the Agency's primary goals is to provide services to veterans that will help them live healthy, productive and independent lives. Preventive treatments such as counseling, short-term housing, and job training is a cost-effective way to reintegrate veterans back into the community, and can serve to minimize and/or delay more costly institutional services. For example, improving the physical and mental well being of Vietnam veterans in their 60's can help extend the time they can live independently, rather than in a long-term care facility.

By 2020, Washington will be home to over 220,000 Vietnam veterans over age 65. An appropriate blend of **prevention** and intervention strategies must be employed to address their long-term care needs, while ensuring federal resources support their requirements.

4. The unique characteristics of the veteran population under age 45, include:

- **A greater proportion of women veterans:** The 2000 Census reported 47,600 female veterans in Washington State, representing 7% of the total veteran population in the state. Federal VA projections indicate that woman veterans will increase to 9% by 2010, but the percentage for the age group under 35 will rise to 19%.

¹ National Veterans PTSD Study

² 2000 U.S. Census

- ***A more diverse veteran population:*** The military services represent the most diverse organizations in the nation. According to a Department of Defense study, 38% of military personnel are minorities. As this current active duty population separates from service, our state's veteran population will become more diverse.
- ***Physical and Psychological Casualties of Recent Combat Veterans:*** War-related physical and psychological traumas are affecting veterans returning from current conflicts. While total numbers of individuals requiring treatment will not be known for some time, current trends indicate the demand for both physical and mental health services will remain high.
- ***Uncertainty of Future Active Duty Levels:*** Federal VA demographers are projecting slight declines in veteran population over the next two decades; however, all current indicators – including the fact our nation is at war – are counterintuitive to these projections. If, due to the increased demands from the war in Iraq or any future conflicts, the level of active duty military population were increased, it could result in significantly higher numbers of younger veterans over the next two decades.

Similar to the focus on the Vietnam era, WDVA must prepare for the impact of the current war. It is clear that an appropriate level of service will need to be sustained to provide **preventive** transitional services to current war veterans who will have difficulty reintegrating into the community.

APPRAISAL OF THE EXTERNAL ENVIRONMENT - EMERGING ISSUES

Washington's State Veterans Homes play a vital role in providing long-term nursing care to elderly, medically indigent veterans who, because of deteriorating health and lack of family support, require care in a nursing home. The federal VA funds 65% of the daily cost of care through contracts and/or the traditional VA per diem program. The federal VA also funds 65% of construction for acquisition of additional long-term care beds. As the veteran population over age 65 increases exponentially, the State Veterans Homes will continue to be a vital resource, serving veterans who require nursing home care.

WDVA is also committed to expanding its already growing role in the provision of **preventive services** to veterans who served in Vietnam and later conflicts. Of the estimated 5,000 homeless veterans in Washington State, roughly half served during Vietnam. The 2000 Census revealed an overall veteran poverty rate of 5.6%, meaning there are nearly 25,000 veterans in Washington living in poverty. Through partnerships with the federal VA, counties and other community-based organizations, WDVA will expand the provision of **preventive services** – PTSD treatment and counseling, alcohol and substance abuse services, education and job training, and short-term housing – that will help younger veterans in need become healthy, productive and independent members of the community. By helping these veterans when they are in their 40's, 50's and even 60's, the need for more costly intervention services, including nursing home care, will be reduced in future years.

This is a significant policy issue for 05-07 biennium budget.

Federal VA

The economic downturn in Washington State is impacting the availability of health services and the economic vitality of vulnerable veterans and their families. A recent federal VA report³ shows an increase of over 9% in the percentage of Washington veterans making initial application to the federal VA Health Care System. (Nationwide, there was a 4.5% increase.) While demand for federal VA health care is up, the VA is restricting access to services and examining methods to realign assets through a process called Capital Assets Realignment for Enhanced Services (CARES). As the veteran population ages and requires higher levels of health care, the result may be additional partnerships with states and communities, especially in the areas of long-term care and mental health services. This is a significant opportunity for Washington State to ensure federal resources are captured and additional financial burden on the state taxpayer is avoided.

Federal VA policies for assisting the future long-term care needs of a growing elderly veteran population have not yet been established. However, recent United States General Accounting Office (GAO) testimony, provided to the House Veterans Affairs Committee, points to several near-term implications for WDVA. First, the federal VA commitment to the state veterans home program remains strong, as evidenced by the \$32 million construction grant awarded in 2001. Second, Congress directed the federal VA to develop a modern healthcare system through the 2000 Millennium Healthcare Bill. This system was to balance non-institutional services in the future, as increasing demands for long-term care grow in relation to the federal budget deficit.

Capital Assets Realignment for Enhanced Services (CARES)

CARES is a nationwide study of the VA health care system – the nation's largest health care system. The goal of CARES is to determine the VA's capability to support the delivery of veterans' health care services through the next 20 years. The CARES plan is a capital planning process to determine, based on future demand, where to build, rebuild or divest the national healthcare system of hospitals, clinics, and other capital assets.

³ Change in Enrolled Users 2002 – 2003

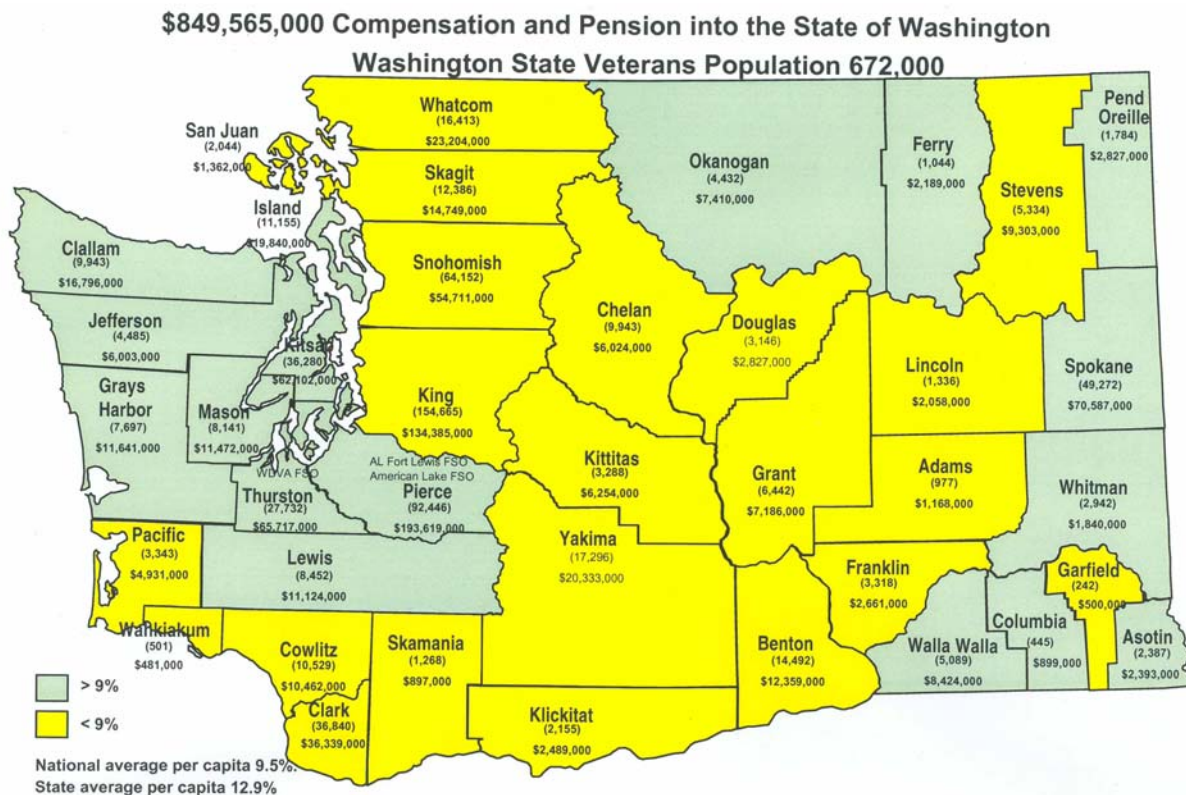
In Washington State, the CARES process has identified several areas where services may be provided through partnerships. Specifically, the potential exists to provide mental health services in rural areas of eastern Washington where the federal VA is considering eliminating existing facilities. In addition, an efficient model for nursing home services, such as the Spokane Veterans Home, could be utilized in strategic veteran population centers throughout Washington State.

Trends in Long-term Care

National and state initiatives toward community-based services provide our citizens with choices that maintain them at the highest level of independence and function, and at the lowest cost to the state. WDVA is strategically moving towards coordinating access or providing veterans with the full spectrum of choices and services that will allow some veterans to remain in their homes or other community settings for as long as it is practical. WDVA's ability to obtain federal resources make these options both practical and financially beneficial.

Economic Vitality of Veterans and Families

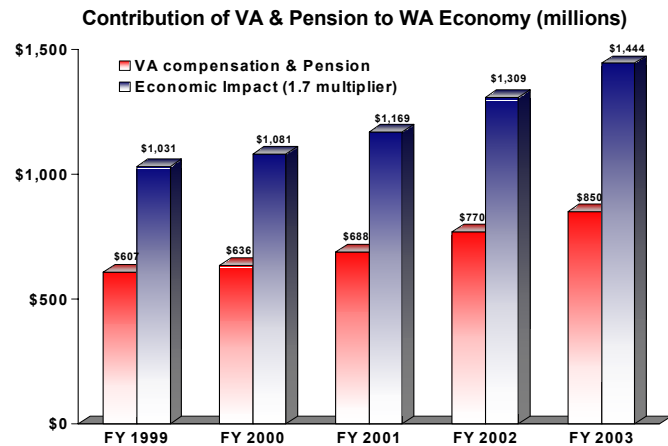
The receipt of federal VA compensation and pension directly impacts the economic vitality of veterans and their families. Washington State is a national leader in the provision of VA compensation and pension services. In Washington State, 12.9% of the veteran population receives compensation or pension – nationwide the average is 9.5%. Compensation and pension dollars are typically spent in local communities generating sales tax revenue for cities, counties and the state.



As a result of strengthened Field Service efforts, Washington veterans receive over \$849 million in payments annually. As the economy lags and citizens look to other resources, WDVA can employ **preventive** strategies to assist veterans and their families in maintaining financial self-sufficiency. In turn, their reliance on other state assistance programs is decreased, reducing their vulnerability.

Compensation and pension are not only beneficial to the veteran and their family, they also have a positive economic impact on local communities. These dollars are typically spent locally, generating sales tax revenue for cities, counties and the state. However, the benefit of this income doesn't stop with sales tax revenue.

If a conservative multiplier is applied to the funds received by Washington veterans, the impact on the economy is potentially a \$1.4 billion economic boost.⁴



Veterans of Current and Recent Combat Operations

The 2000 Census revealed that 16% of Gulf War veterans suffered from a war-related disability and that many continue to have significant psychological and physiological problems. Preliminary reports on veterans of Operation Iraqi Freedom, compiled by the federal VA Office of Public Health and Environmental Hazards, indicate veterans are experiencing war-related physical and psychological problems similar to veterans of other wars. Approximately 13% of Operation Iraqi Freedom veterans have sought health care from the federal VA since deployment, and are being diagnosed with a variety of medical and mental health disorders, including PTSD.

⁴ The 1.7 multiplier was utilized in a recent report published by the Columbia River Development Council, which estimated the actual impact on Washington's economy at 1.7 times the initial income amount.

KEY INITIATIVES

WDVA understands that involving the community we serve is the key to future planning. Through community meetings such as the Governor's Veterans Affairs Advisory Committee (VAAC) and Statewide Commanders' Call, and by staying connected with the Veterans Homes Resident Councils, federal VA, and state and local government partners, WDVA is involving our customers in planning for tomorrow's needs. The veterans community helped shape the original ten-year Master Plan and will again be involved as the Agency updates the Master Plan. Ultimately, this plan will drive the 2005-2007 budget process, and the Agency's ten-year Capital Master Plan.

Assess Veteran Population's Changing Needs

In November 2000, a Statewide Master Plan was completed, to determine how WDVA could meet the needs of the growing veteran population. Due to the age of the facilities and the projected demand for care, the study indicated a need to replace existing nursing home beds.



The Master Plan addressed the following:

- A forecast of the future demand for skilled nursing services and an identification of certain community-based rehabilitative services based on projected age, sex, marital status, and income composition.
- An assessment of the most cost-effective role for the state to play in addressing such demands.

(Artist Rendition of New Veterans Home Facility)

- An analysis of program, community, capital and operating costs and benefits of consolidating Western Washington Veterans Homes operations, including proposed alternatives for uses for the other campus, **if** operations are consolidated.
- An assessment of alternatives for providing skilled nursing and assisted living services in Eastern Washington.
- An assessment of the feasibility, costs, and benefits of alternative strategies for providing rehabilitative services for veterans.

Master Plan Status:

- 2001: Secured a \$32 million federal construction grant to replace nursing home beds at Retsil, Washington.
- 2001: Established, through certificate of participation, a modern 100-bed skilled nursing facility in Spokane Washington.
- 2004: Update the Master Plan to include the overall program and facility-related strategies for the State's Veteran Homes in Retsil, Orting and Spokane and the development of transitional programs for Vietnam era veterans and veterans of more recent conflicts.

While detailed analysis and updated strategies will be developed as part of the master planning process in Summer 2004, emerging strategies for the State Veterans Homes include:

Maintain Long-Term Care Capacity for Vulnerable Veterans

For the state's most vulnerable veterans, State Veterans Homes are the most appropriate setting to deliver care, from both a financial and a quality of care standpoint. As noted previously, the rapid aging of the veteran population, including the significant increase in the number of veterans age 65 and over, is resulting in an increased demand for long-term care beds at the State Veterans Homes.

It is vital that the Agency retains existing nursing care bed capacities at its three Veteran Homes to accommodate elderly, medically indigent veterans who, because of deteriorating health and lack of family support, require quality long-term care. Sixty-five percent of the cost of operating the Veterans Homes is leveraged through the federal VA per diem program, and the resulting net cost to the State of Washington is lower than in a community, Medicaid-eligible nursing facility. Maintaining capacity for vulnerable veterans in State Veterans Homes is in the best **economic** interest of the state.

In order to adequately address the demand for care and maintain the capacity to continue providing high quality care, the Master Plan recommended the replacement of aging nursing care buildings. In 2001, WDVA made application and received a construction grant from the federal VA to ensure aging facilities would be replaced in order to serve the growing veteran population. The federal VA provided 65% (or \$32 million) of the funding for a 240-bed replacement nursing facility at the Washington Veterans Home in Retsil. Transition into this new facility will take place in early 2005.

Based on the current demand for beds, the projected growth in aging veterans and the economics of providing care in a State Veterans Home, construction of a replacement facility and maintenance of existing beds are necessary investments in the future of our state's veterans. ***How we operate State Veterans Home beds is a significant policy issue for the 2005-2007 biennial budget.***

Preventive Services

Upon completion of the new 240-bed nursing facility at Retsil, capacity will be available in older, existing buildings. While these older facilities are no longer suited for providing high-level nursing care, they do offer an appropriate location for short-term **preventive** programs for veterans in need. In addition to having available bed capacity, Retsil's location near Bremerton provides easy access to community health, social services, and employment opportunities.

The focus of preventive services for these vulnerable veterans will follow the principles outlined in the 2000 Statewide Master Plan, including:

- Reintegrating Vietnam veterans into the community as productive, healthy, and independent members. By providing **preventive** services while these veterans are in their 50's and 60's, the intent is to minimize or delay the need for more costly intervention services in later years, such as 24/7 for care in a nursing home.
- Short-term focus with pre-determined lengths of stay based on individual needs.
- Funding through non-traditional (non-state general fund) sources, including federal homeless grants and per diem, local government and non-profit community organizations.
- Operating philosophy based on successful outcomes, including the measurement of economic benefit to the state agencies that interact with our programs.

The 2000 Statewide Master Plan estimated that a successful veterans transition program, at a Veterans Home, could result in an annual savings of at least \$4 million in public intervention costs.

The Agency will use the collective resources of nonprofit, private, local and federal entities to make a transitional program self-sufficient. ***Funding for the 2005-2007 biennium will not assume general fund-state resources.*** Some of the services that could be provided include: adult day care, substance abuse aftercare, mental health services, community living skills, entrepreneurship, apprenticeship, on-the-job training programs and Title 31 rehabilitation services in partnership with the federal VA.

Nursing Home Care Linkage to the Priorities of Government

The 2000 Statewide Master Plan proposed the consolidation of nursing home services and a short-term transitional program at the Orting campus. This program was to provide health care, substance abuse treatment/counseling, mental health services, employment counseling, and skills training, targeted to homeless or struggling veterans.

In 2002, the Priorities of Government affirmed the state's commitment to improve the condition of vulnerable citizens and caused WDVA to look again at the Agency's Master Plan. Given the demographic trends of an aging veteran population and the current demand for nursing home care, the maintenance of existing Veterans Home beds for the most vulnerable is the best decision for the state.

STRATEGY AND CAPACITY ASSESSMENT

Intervention and the WDVA Evolution Toward Prevention

Programs at the Veterans Homes are adapting to the emerging and specialized services required by the veteran population, at the lowest cost to the State. In the past three years, WDVA made a significant and deliberate 76% reduction of its domiciliary (boarding home) beds and transitioned over 80 residents to community settings. This made resources available to establish assisted living beds and provide limited respite care, hospice services, and short-term physical rehabilitation services. Other service options such as Alzheimer's and related dementias, gero-psychiatric, and an expansion of short term Medicare services to western Washington will be further explored for implementation at all three facilities.

As previously discussed, capacity also exists to initiate prevention programs within the Washington Veterans Home in an effort to further adapt to the needs of the veteran population. These initiatives will allow resources from federal, local and community sources to be tapped. Services can be provided without additional resources from the state.

Spokane Veterans Home – The Model for Veterans Nursing Home Care

The Spokane Veterans Home, in contrast to the large campuses of the western Washington Veterans Homes, provides the efficiencies of a 100 bed, single-building facility. The facility is Medicaid and Medicare certified. In regard to both administrative and direct care components, staffing levels are lean and staff members handle multiple tasks. The Home's acuity level, as determined by the Minimum Data Set (MDS), a national tool that determines category of care, is 1.9 compared to the average state acuity level of 1.6.⁵

Revenue generated by the Spokane Veterans Home funds the operational costs as well as debt service on the \$4.2 million purchase price, making the facility self-sufficient and independent of the state general fund. In the future, similar opportunities may exist allowing WDVA to capitalize on strategically located facilities to serve vulnerable veterans in their communities.

WDVA was recently awarded a federal VA grant to pay 65% of the construction costs for a kitchen within existing space in the Spokane Veterans Home. Completion of the kitchen will provide cost-effective food service delivery in an area with extremely limited contracting options. It is estimated the total cost of construction and operation will be recovered in less than 10 years, while quality of care will improve.

Prevention in Communities

Through the Veteran Field Service Network, WDVA provides "just in time" homeless **prevention** services that include access to job training and employment, incarcerated veterans programs, outpatient substance abuse treatment and Post Traumatic Stress Disorder counseling. These programs often enable veterans to move above the poverty level and restore their dignity and self respect, while allowing them to live independently. Future master planning will strengthen partnerships between field services, Veterans Homes and community partners. WDVA's goal is to prevent veterans from becoming dependent on the state's social services structure. This will allow resources to be invested in other government priorities.

⁵ Acuity is a measure of the health care requirements of residents. A higher acuity equals more intensive health care requirements. It is important to note when comparing acuity levels, that each tenth of a percent variation has profound impact on workload, staffing, utilization of supplies and equipment, and scrutiny by both the federal VA and State survey entities.

Sustaining Economic Vitality of Veterans

Further development of the veterans Field Service Network continues to result in increases in the number of veterans receiving federal VA compensation and pension and the number of veterans who can remain financially self-sufficient. The veterans Field Service Network now includes 22 employees and over 125 contractors and volunteers who diligently provide claims preparation services to veterans across the state. The goal of the veterans Field Service Network is to become a national leader in assisting veterans with VA compensation and pension claims to the federal VA. To date, the efforts have yielded promising results. In federal fiscal year 03, the annual amount of compensation and pension received by veterans in Washington State grew from \$760 million to \$849 million. Washington is among the top five states for the percent of veterans in receipt of federal VA compensation or pension at 12.9%, while Texas leads the nation with 17%. WDVA's goal is to become national leaders with at least 17% of the veteran population receiving VA compensation and pension during the 2005-2007 biennium.

Saving Medicaid Resources

A partnership between WDVA and the Department of Social and Health Services is reducing some veterans' reliance on Medicaid, saving the state millions of dollars a year.

The project focuses on linking veterans or their widows with the following federal resources:

- **Aid and Attendance:** Many veterans on Medicaid are not drawing a monthly federally-funded compensation for health care assistance from the federal Department of Veteran Affairs although they may be eligible for it.
- **Prescription drugs:** Veterans enrolled in the VA health-care system are typically eligible for federal coverage of prescription drugs. Drugs are an enormous cost-driver for the state's Medicaid program, which spends up to \$1 billion a biennium purchasing medication. Any of this cost that can be shifted to the federal government helps ease the state's burden.
- **Durable Medical Equipment:** The federal government also normally covers the cost of medical devices ranging from wheelchairs to breathing aids and other essential equipment.
- **Family benefits:** Widows and children of veterans may also be eligible for federal financial or medical coverage, e.g., CHAMPVA and TRICARE benefits, which cover about 80 percent of long-term care and 100 percent of drugs.

Strategic partnerships, such as these, are ways in which WDVA ensures Washington State is capturing available federal resources and honoring the nation's debt to veterans.

Civil Service Reform

WDVA has been engaged and will participate in early implementation of Release 1 of HRMS and will be prepared to implement phase one of civil service reform in July 2005. Because WDVA is a composite of divisions and programs with experience in labor relations and contracted services, WDVA is a leader and an ideal organization for embracing the coming reforms.

Information and Technology

The WDVA IT organization provides cost effective technological foundations and solutions to ensure the Agency accomplishes its core mission.

IT provides support services including: network infrastructure, security, Agency websites, hardware/software standards, portfolio management, project consulting, help desk services, contracts and development, and implementation and maintenance of priority information systems. Among these services are:

- Security Analysis, Consultation, and Administration to IT network;
- Support programs in the initial development, and implementation of priority IT systems;
- Manage, design, and develop related policy issues for the websites;
- Select and standardize software and hardware to deliver information technology; and
- Desktop support service: technical management of all Agency information services and infrastructure.

Three major challenges were identified in the most recent Department of Information Services IT audit:

1. Lack of sufficient resources to manage increasing internal and external demands of the IT resources in an evolving technological era (i.e., Agency's Health Management Information System Upgrades and Functionality).
2. Shrinking IT budget has resulted in hardware and software incompatibility and obsolescence, resulting in employee productivity and morale issues.
3. Meeting Information Services Board (ISB) Standards and Guidelines – All state agencies are required to meet the ISB Standards, perform a security audit every three years, and update their Security Plan, Disaster Recovery Plan, and Agency IT Portfolio annually. Additionally, all agencies must submit a letter of compliance to the ISB annually.

Recognizing risks as opportunities, the Agency is implementing the following improvement plans:

1. To meet ISB standards, WDVA will utilize an outside consultant to help the Agency achieve compliance and help resolve security audit non-compliances.
2. To resolve staff resource issues, WDVA will hire a security-planning specialist to maintain and update our security planning annually.
3. The Agency will outsource its email and domain to DIS to lessen the current workload and improve stability, reliability, and productivity of the Agency's resources.
4. To mitigate incompatibility and warranty issues, the Agency will use a three-phase plan (three-year) to lease and upgrade all its computers.

PERFORMANCE ASSESSMENT

Improve security of Washington's vulnerable adults & Improve economic vitality of individuals

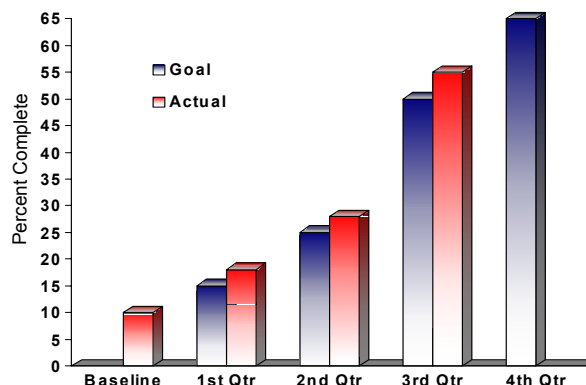
Institutional Services

Reduced Reliance on General Fund-State: State taxpayers save money when veterans are served in State Veterans Homes, because the federal VA contributes to the veteran's cost of care. Since 1993, the State Veterans Homes have continued to reduce their reliance on the State's General Fund by 32%. This was possible because the Agency dramatically improved performance (see chart, page 27) and aggressively pursued resources from other sources, including Medicaid, Medicare and the federal VA. (see chart, page 28)

Serving the Vulnerable Veteran Population: Acuity levels at the State Veterans Homes are indicators that State Veterans Homes serve a unique population with unique medical requirements. Statewide, acuity levels at the Veterans Homes exceed the state average. In spite of caring for customers with the highest care requirements, the three State Veterans Homes each received "5 Star" ratings by Health Grades, Inc., a national health care quality ratings and services company.

Washington Veterans Home Construction:

As a result of the WDVA Statewide Master Plan, construction of a 240-bed replacement nursing facility began in 2002. A major goal of the \$47 million construction project was to keep the project on time and on budget, while maintaining quality standards. The project is on track and some areas are exceeding the project milestones. This project has been funded 65% federally and 35% by the state.

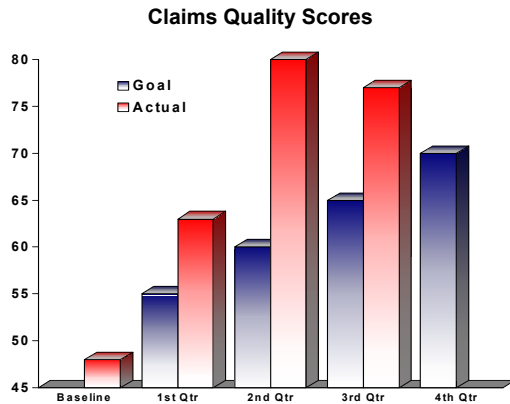


Spokane Veterans Home: To proactively meet the Priorities of Government while serving the veteran community most efficiently and effectively, WDVA set a goal to maximize revenues to fund the Spokane Veteran Home without direct general fund-State appropriation. This business model – of a single-building nursing facility rather than multi-building complex – is the strategic direction of WDVA's future business trend and economic modeling.

Veterans Field Services

Veterans Field Service Network: In 2003, contracts with Veteran Service Organizations were revised to include aggressive accountability measures and tracking, to clearly demonstrate the benefit the Field Service Network brings to our state.

The Field Service Network consists of service officers who provide assistance to veterans applying for federal VA medical benefits and/or disability compensation. Washington State received over \$760 million in compensation and pension payments in federal fiscal year 2002. WDVA set a goal to increase this figure by approximately \$50 million per year in new claims. In 2003 the amount of compensation and pension grew to **\$849 million, a 16% increase that exceeded anticipated growth**. Compensation and pension directly benefits the lives of individual veterans in Washington State and stimulates local economies generating sales tax revenue for cities, counties and the state.



WDVA also set a goal to reengineer its claims processes to better serve customers and stakeholders. The result has been a 5% improvement in claims quality scores each quarter and a reduction in total claims processing times of 10 days per quarter.

Post Traumatic Stress Disorder (PTSD) counseling: Since 1984, WDVA has maintained a unique outpatient counseling program designed to provide confidential counseling services to men and women veterans with war era readjustment and PTSD treatment needs.

These services include grief and support services for eligible family members of those state residents deployed from active duty, National Guard and military reserves in times of conflict. Services are provided through contracts with 28 specialized counselors to help veterans resolve their war-related PTSD issues. *This network has become a model of county, state and federal cooperation.* With the assistance of the PTSD Program, many veterans apply for and receive a service-connected compensation from the federal VA.

For example, a sample of 340 veterans (out of approximately 1,500 clients served annually) after 25 months in the program revealed the following:

- At the time of Intake: No participants were in receipt of Social Security Disability benefits.
 - 25 months into PTSD treatment: 51% were receiving SSD and another 10% were awaiting a case finding. Most of the balance remained employable to some degree or hoped to return to employment.
- At the time of Intake: Participants averaged a 9% federal VA service connected disability rating.
 - 25 months into PTSD treatment: Participants averaged a 57% federal VA disability rating.
- Maintenance of work and a return to social productiveness:
 - 25 months into PTSD treatment: 29% of participants were employed, and among those with disabilities another 10% were volunteering in their communities. Another 32.2% were reported as taking-on greater roles within their family, and only 8.4% were characterized as having no social connections outside of treatment. 19% of the total sample had reached their personal goals of treatment and were fully terminated from the program.

The WDVA PTSD program has created lifesaving treatment, support and other assistance that would otherwise be denied to Washington residents. Such services are preventive measures keeping veterans off other state-funded assistance programs (such as general assistance-unemployable, GA-U), out of hospitals and from behaving violently, including attempting suicide and domestic violence. The absence of federal VA services in some areas of Washington means that this program is the only alternative for many war veterans and their families.

Military actions abroad have increased the demand for PTSD services and counselors in this program will be an integral part of the demobilization services for veterans returning from Iraq, Afghanistan and other areas of the world.

Homeless Veteran Programs: Veterans of all eras have experienced difficulty adjusting to civilian life following a conflict and many veterans have recurring physical and emotional symptoms of war. The Department of Housing and Urban Development estimates that 23% of the homeless are honorably discharged veterans.

WDVA is committed to providing a hand-up to struggling veterans who have made a commitment to turn their lives around. The Agency currently has two grants to assist homeless veterans with employment & training from the U.S. Dept. of Labor:

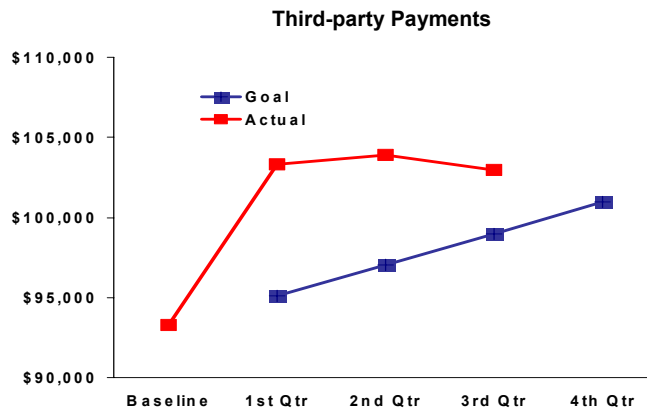
1. \$300,000 Homeless Veterans Reintegration Project (HVRP).
2. \$249,595 Homeless Women Veterans Reintegration Project (HWVRP).

The grants serve the Seattle metropolitan area and the surrounding Puget Sound Region of King, Pierce, Thurston, Snohomish and Kitsap counties.

King County Veterans' Incarcerated Program: In 1996, WDVA began a partnership with King County to reduce the number of veterans in the County's jails. The King County Veterans' Incarcerated Program (VIP) helps veterans recently released or currently incarcerated stay out of jail with a full array of on-site and referral sources, including services for family members. The program's twelve-month recidivism rate is less than 20% compared to a rate of over 60% for non-veterans. The Veterans Incarcerated Project serves an average of 163 veterans, saving King County in excess of \$250,000 annually.

Administrative Services

WDVA continues to focus on reengineering Agency business processes to increase local revenues and third-party payments. WDVA has successfully increased third-party payments for medical services by 2% per quarter through the third quarter of 2004. Similar to other funding sources, the increase in this fund will reduce the Agency's reliance on State GF.

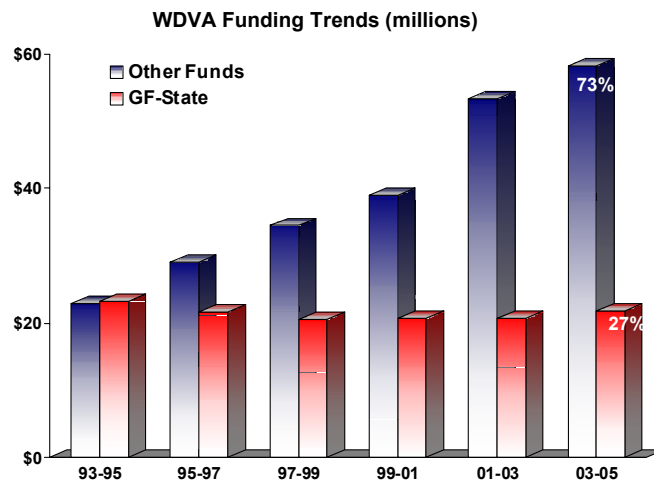


FINANCIAL ASSESSMENT

WDVA relies on funding from three primary sources: federal, local and general fund – state.

These revenue sources are projected to remain solvent throughout the period covered by this strategic plan.

WDVA's performance history clearly demonstrates our ability to capitalize on funding from alternative sources. While total funding for WDVA increased 58% over the past five biennia, dependence on the state general fund actually declined 7% before adjusting for inflation.



In order to maximize the funding WDVA receives, the Agency has aggressively pursued federal resources to offset the state's contribution toward serving veterans. This has resulted in an increase in the overall budget, while the portion paid by Washington taxpayers has decreased.

As previously outlined, opportunities also exist for partnerships with other state and local government agencies and for acquisition of grant funding for targeted programs in support of the Agency's strategic initiatives. However, the financial environment in the medical arena does have its challenges.

With the national economy facing record deficits, the Centers for Medicare and Medicaid Services (CMS), a major source of revenue for WDVA, has significantly increased the level of resources they devote to compliance reviews. This heightened scrutiny from CMS applies pressure on WDVA to require a higher level of sophistication in medical business skills from our financial and operations staff. During the 01-03 biennium, WDVA began reengineering its business operations and is consequently well positioned to address this challenge. Further, WDVA sees an even greater opportunity to continue improving the efficiency of business operations and potentially take advantage of additional payment sources.

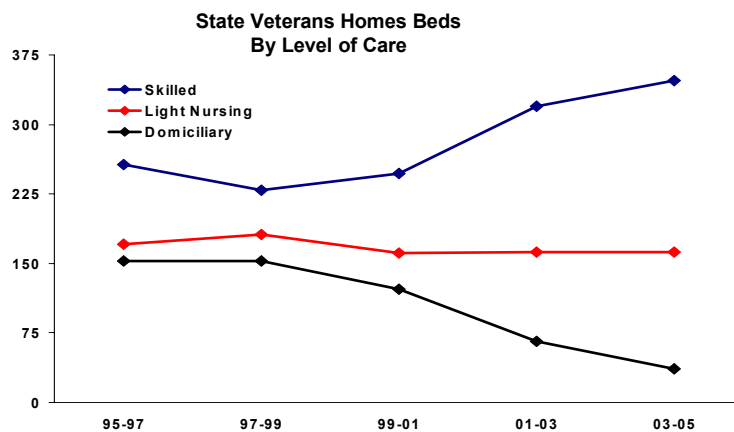
COST REDUCTION STRATEGIES

WDVA has consistently sought out and implemented strategies resulting in General Fund-State savings. The Agency did not wait for a budget crisis to reinvent the way it does business. Proactive steps such as community placements – where appropriate – and the development of transitional programs to prevent future care are of significant benefit to individual veterans and Washington taxpayers.

Community Oriented Services – Giving Vulnerable Veterans a Hand-up

The Veterans Homes in Orting and Retsil offer domiciliary (boarding home) care. Veterans residing in the domiciliary units are typically younger, do not have serious medical conditions, but have other challenges preventing them from fully functioning within their own communities.

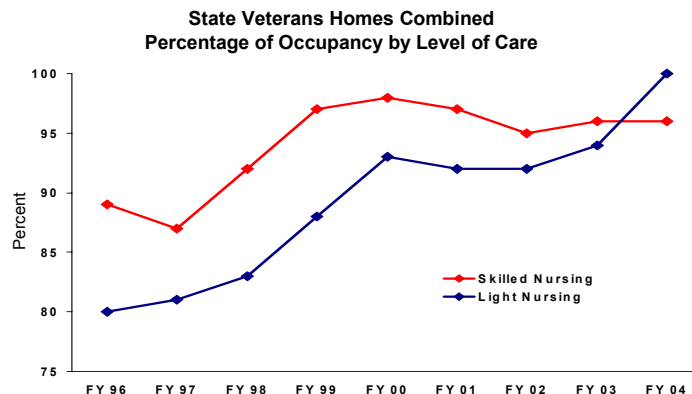
In 1997, the State Veterans Homes had a total of 153 domiciliary beds. Today, there are 36 beds. A review of the demand for care indicated that more veterans were in need of higher levels of health care. WDVA focused on transitioning veterans from domiciliary beds into community placements or independent living.



Responsiveness to Emerging Veterans Needs

The State Veterans Homes direct their resources wherever needed, to respond to the changing requirements of Washington's vulnerable veterans. This includes shifting beds, between skilled, assisted living and domiciliary levels of care, when necessary, to accommodate demand from the community. By adapting in this manner, the homes better serve the veterans community while lowering unit costs by keeping census high.

The homes have above average fill levels when compared to community nursing homes - 96% in skilled nursing for State Veterans Homes versus 85% in the community. Retsil and Orting combined are currently operating at 99% fill. This consistently high level of performance is clear verification of the demand for care among veterans and the high quality of care provided in State Veterans Homes.



Managed Healthcare and Associated Business Practices

Managed Health Care and Associated Business Practices focus on the delivery of high-quality health care services using evidence-based medicine and deliberate management and redistribution of existing resources. The three Veterans Homes are working together to identify and adopt best practices within the Agency, establish consistent protocols and measurements and compare them against established long-term care industry standards. This project encompasses the full spectrum of functions from pre-admission, through the full length of stay processes and services that support the resident's quality of life, to his/her discharge and disposition of assets.

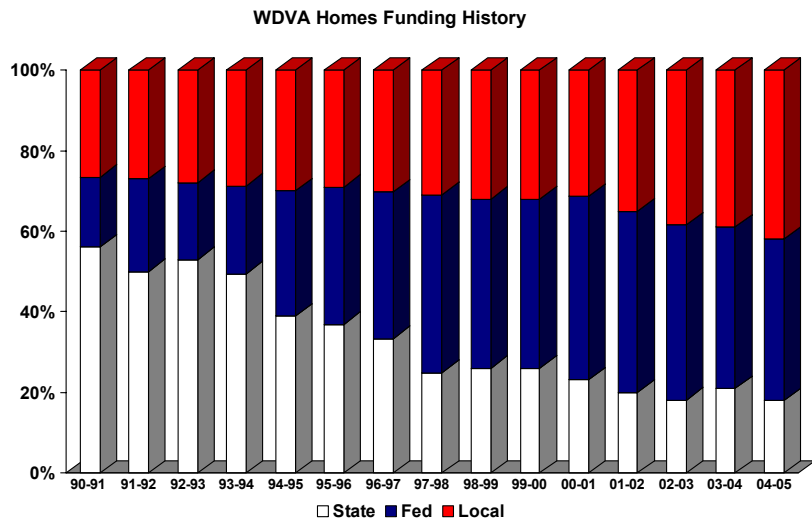
Moving from Intervention to Prevention

The Veterans Field Service Network provides critical programs across the state, bringing just-in-time services to veterans. These programs help veterans remain productive and often prevent the need for more intensive institutional services. Primary examples include: a statewide network of mental health contractors who treat and support veterans with Post Traumatic Stress Disorder counseling where they live; a partnership with King County to work with incarcerated veterans to provide assistance and skills necessary to break the cycle of offending and incarceration; and a Field Service Network that assists veterans in accessing federal benefits which often provide the means to live independently. As determined in our Statewide Master Plan, the Agency is also focusing efforts on the development of programs to bridge the gap between outpatient programs and full institutionalization.

Leveraging Federal Resources

State taxpayers save money when veterans are served in State Veterans Homes, because the federal VA contributes to the veteran's cost of care.

The State Veterans Homes have decreased their reliance on the state's general fund from 52% in the 1991-93 biennium to 19% in 2003-05. This was possible because the Agency aggressively pursued resources from other sources, including Medicaid, Medicare and the Federal VA.



The Spokane Model – Defining Efficient Facilities for the Future

Acquisition of the Spokane Veterans Home crystallized the significant advantages of operating a single building nursing facility rather than supporting multi-building complexes. As WDVA positions for the future and updates the Statewide Master Plan, Spokane will serve as the standard for economic modeling.

PARTNERSHIPS

WDVA also achieves results for vulnerable veterans and ensures the state's veterans receive appropriate, high quality services through several successful partnerships. While current partnerships have proven to be extremely beneficial to the well being of veterans, WDVA has identified significant potential for additional partnerships in the future.

- **WDVA - DSHS Collaboration:** Identifies veterans or widows of veterans who may be eligible for VA compensation or pension, prescription drug benefits, and other federal supplemental insurance programs. These funds directly offset the state Medicaid dollars spent for care in community nursing homes and has the potential to save the Department of Social & Health Services millions of dollars per year when the program is implemented state-wide.
- **King County Veterans Programs,** including homeless services and the Veterans Incarcerated Project. These programs have decreased King County's recidivism rate (for veterans participating in the program) to under 20%; thus avoiding jail days and providing **preventive** services to homeless veterans.
- **Troop Demobilization:** In addition to active duty components, over three thousand citizen-soldiers from the Washington National Guard will return to Washington State following deployments in Iraq, Afghanistan and other regions of the world. Many of these veterans will require services to address war-related physical and psychological problems. WDVA is working closely with the Washington Military Department, Fort Lewis and the federal VA to ensure our state's soldiers are provided with timely information and quality services when they return. During deployment, WDVA is working closely with the Washington National Guard Family Support Network to ensure our veterans network is available to assist with emergency financial aid, domestic support (i.e. transportation, child care, etc.) and information on the various VA programs and processes.
- **Under development in Agency Master Plan:** Partnerships with counties allowing them to refer veterans to transitional programs in the State Veterans Homes.
- **Under development in Agency Master Plan:** Partnership with the federal VA to allow VA health care providers to provide community care on the grounds of a State Veterans Home. This partnership would expand access to federal VA health care and reduce reliance on community or state funded care.

WDVA POG BALANCED SCORECARD MODEL



Seamless Customer Service

WDVA believes that Excellence can only be planned. Planning Excellence is a deliberate, diligent, rigorous process that includes statewide participation of key employees, customers and stakeholders to achieve the Priorities of the Government (POG.) The updated six-year Strategic Plan (2005-2011), as a result, reflects this thought process depicted in the model above. This model illustrates the relationship and linkage between the POG at the highest level and individual employee's contributions at the deepest levels in the Agency. The goal of WDVA Strategic Planning is to create strategic value added by aligning all Agency contributions to the Priorities of the Government. This model has incorporated the Balanced Scorecard Model's key components as a foundation to improve the decision-making process and value chain. Continuous Improvement, Cost Competitiveness, Learning and Growth, and Seamless Customer Service are pillars of a Result-Oriented and Learning organization. The other significant benefit of this model is that it drives a Performance-Based Culture to achieve not only the POG requirements, but it also positions the Agency to meet the contingencies of a changing human resource system. Individual employee's accomplishments, including their training development plans, will be aligned with the Agency's goals and the Priorities of Government, streamlining performance planning process and requirements.

GOALS, OBJECTIVES, AND STRATEGIES

Goal 1: Improve the Quality of Care and Services for Vulnerable Veterans and Their Families

Priorities of Government:

- *Improve the security of Washington's Vulnerable Children and Adults*
- *Improve the health of Washington Citizens*

- 1.1 Increase residents/families customer satisfaction with service delivery at the homes
 - 1.1.1 Establish a systemic customer-focused culture based on best customer service practices
 - 1.1.2 Conduct resident and family satisfaction surveys
 - 1.1.3 Survey veteran organizations' leadership
- 1.2 Provide **preventive** services to lower veteran homelessness and unemployment and improve their wellness, quality of life, and independence
 - 1.2.1 Increase the number of needs assessments completed for homeless veterans
 - 1.2.2 Increase the number of homeless veterans enrolled in employment and training
 - 1.2.3 Increase the Number of Homeless Veterans moved to Transitional or Permanent Housing
 - 1.2.4 Increase the Number of Clients Served by the Veterans Estate Management Program
 - 1.2.5 Sustain or Lower King County's Veteran Recidivism Rate
- 1.3 Utilize psychological assessments and outpatient counseling services to minimize the long-term impact of PTSD
 - 1.3.1 Use existing indicators to sustain client mental health functioning
 - 1.3.2 Improve social and economic stability of veterans/families by various existing methods
 - 1.3.3 Sustain progressive linkage to federal programs for long-term care of veteran clients
- 1.4 Provide services that meet or exceed national quality of care indicators
 - 1.4.1 Develop Agency benchmarks consistent with national quality indicators
 - 1.4.2 Establish protocols and tools to measure and report performance

Goal 2: Maximize Resources to Honor the Nation's Debt to Veterans

Priorities of Government:

- *Improve the Economic Vitality of Businesses and Individuals*

- 2.1 Increase local revenues
 - 2.1.1 Increase resident contributions through improved debt collection and targeted billing processes
- 2.2 Provide high quality, long-term care services to Washington veterans at the least possible cost to the state General Fund through managed health care
 - 2.2.1 Increase third-party payment for billing services through improved business processes

- 2.3 Maximize federal dollars coming into Washington
 - 2.3.1 Outreach to homeless veterans
 - 2.3.2 Claims quality assurance
 - 2.3.3 Sustain Veterans Home census at 95% or better
- 2.4 Model sustainable practices
 - 2.4.1 Implement and measure a plan of sustainable practices

Goal 3: Review Core Processes to Anticipate and Influence Future Needs

Priorities of Government

- *Improve the Security of Washington's Vulnerable Children and Adults*
- *Improve the Ability of State Government to Achieve Its Results*

- 3.1 Increase effectiveness and efficiency of service delivery for emerging veteran community needs
 - 3.1.1 Transition plan for Washington Veterans Homes
 - 3.1.2 Develop and implement community-oriented rehabilitation program (transition)
- 3.2 Improve data management so it drives decision-making and Agency performance
 - 3.2.1 ADL (Resident Managed Health Care Information System) upgrade and functionality
 - 3.2.2 IT security planning
- 3.3 Improve Agency performance tools and reports
 - 3.3.1 Develop a performance management tool that streamlines, integrates, and reports mission-critical data
 - 3.3.2 Develop and implement a quality indicators performance reporting grid
- 3.4 Managed health care and associated business practices
 - 3.4.1 Maximize the benefits for which residents are eligible
 - 3.4.2 Implement the resident health plan and process flow for coverage decision making
 - 3.4.3 Develop and implement a process and necessary tools to ensure management is engaged in complete budget cycle
 - 3.4.4 Develop and implement contract management procedure to ensure compliance with OFM guidelines
 - 3.4.5 Develop and implement an action plan for competitive contracting preparation

Goal 4: Drive a High Performance Culture, by Recruiting, Training, and Retaining the Best Talent that Results in Delivery of High Quality Services

Priorities of Government:

- *Improve the Ability of State Government to Achieve Its Results*

- 4.1 Invest in and grow leadership and management capital
 - 4.1.1 Basics of supervision and performance management training for all managers who supervise employees
 - 4.1.2 Human Resource Development Plan implementation to ensure a performance driven culture

- 4.2** Increase the effectiveness of performance reviews to drive a performance culture
 - 4.2.1** Drive consistent performance planning process
 - 4.2.2** Provide tools and resources to all managers to drive performance planning
 - 4.2.3** Develop performance planning implementation and success indicators
 - 4.2.4** Drive accountability through performance planning and management process
- 4.3** Enhance employee communication
 - 4.3.1** Communicate business goals, priorities, and performance measures on set intervals and on internal website
 - 4.3.2** Develop HR Consultant roles and responsibilities matrix